FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* YOUNG WILLIAM D					2. Issuer Name and Ticker or Trading Symbol Theravance Biopharma, Inc. [TBPH]										heck a	onship of F II applicabl Director		g Person(s) to 10%	Issuer Owner	
(Last)	(Fir	,	Middle)	· · · · · · · · · · · · · · · · · · ·	3. Date of Earliest Transaction (Month/Day/Year) 05/17/2017											Officer (giv	ve title	Othe belov	(specify v)	
C/O THERAVANCE BIOPHARMA US, INC. 901 GATEWAY BOULEVARD					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SOUTH S	(/	CA 94080													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date			Date,	Transaction Dispose Code (Instr. and 5)			rities Acquired (ed Of (D) (Instr. :			S E	. Amount of the countries deneficially owned following	у	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount		(A) or (D)	Price	, R	Reported Transaction(s) (Instr. 3 and 4)		(111541 - 4)	(111341. 4)				
Ordinary Shares 05/17/2						2017			A		6,000		A	\$()	35,12	24	D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	vative conversion or Exercise Price of Derivative Security Date (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year)			4. Transac Code (li 8)				6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Shares			8. Prid of Deriva Securi (Instr.	derive Secu ity Bene 5) Own Follo Repo	owing orted isaction(Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Brett A. Grimaud, Attorney-in-Fact 05/18/2017

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.